



Cost Affidavit

Please File 1 Copy
Affidavit Must Be Typewritten

Internal Use

Job Number



1 Filing Status

Filed By:	☒	Contractor		Owner
For Issuance Of:	☒	Work Permit		Cert. of Occupancy
Job Number 410118876				

2 Location

Borough QUEENS	Block 12315	Lot(s) 27	BIN
House No(s) 140-15	Street Name 159 STREET		Apt/Condo No(s)
Special Place Name	Floor(s)		

3 Owner

Last Name	First Name	M.I.	Title
Business Name		Business Phone ()	
Address	City	State	ZIP

4 Contractor

Last Name MIDROY	First Name ROBERT	M.I. A.	Title PRESIDENT
Business Name VALUE PLG. INC.		Business Phone (718) 9390268	
Address 36-05C COLLEGE POINT BLVD.		City FLUSHING	State NY ZIP 11354
Type of Contractor PLUMBING			

5 Cost Information

Estimated	Actual	Cost:
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6 Statements and Signatures

Falsification of any statement is a misdemeanor under Section 28-124 of the Administrative Code and is punishable by a fine or imprisonment, or both.

It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine or both.

Owner Statement

☐	Based on figures submitted to me by contractors who bid for the work described in the aforementioned job, and upon my best judgement and estimate, the cost of the proposed work for the aforementioned job will be the cost stated above.
☐	The final cost of the work described in the aforementioned job was the cost stated above.

Name

Signature

Date

Contractor Statement

To my best knowledge, experience and judgement, the cost of the proposed work described in the aforementioned job will be the cost stated above.

Name ROBERT A. MIDROY

Signature

Date

6/23/08

7 Notarization

State of New York, County of

Sworn to before me this day of 20

Signature

Seal